

Image# 201512189004378505

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# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Adrian Smith		
(b) Address (number and street) 3321 Avenue I		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Scottsbluff NE 69361-4586		2. Candidate's FEC Identification Number H6NE03115
4. Party Affiliation REPUBLICAN PARTY		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)
5. Office Sought House	6. State & District of Candidate NE 03	

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 election(s).  
(year of election)

**NOTE:** This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full) Adrian Smith for Congress		
(b) Address (number and street) 3321 Avenue I Suite 6		
(c) City, State, and ZIP Code Scottsbluff NE 69361-4587		

### DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full) Nebraska Joint Victory Fund		
(b) Address (number and street) 228 S Washington Street Suite 115		
(c) City, State, and ZIP Code Alexandria VA 22314-5404		

*I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.*

Signature of Candidate Adrian Smith  [Electronically Filed]	Date 12/18/2015
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**NOTE:** Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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**FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)**

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**DESIGNATION OF OTHER AUTHORIZED COMMITTEES****[ ADDITIONAL ]**

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:**This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Adrian Smith Victory Fund

(b) Address (number and street)

228 S Washington St  
Ste 115

(c) City, State and ZIP Code

Alexandria

VA

22314-5404

**DESIGNATION OF OTHER AUTHORIZED COMMITTEES****[ ADDITIONAL ]**

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:**This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

RISE PROJECT

(b) Address (number and street)

PO Box 2485

(c) City, State and ZIP Code

Springfield

VA

22152-0485

**DESIGNATION OF OTHER AUTHORIZED COMMITTEES****[ ADDITIONAL ]**

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:**This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

(b) Address (number and street)

(c) City, State and ZIP Code